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| <b>Issue Classification</b><br> | <b>Application/Control No.</b><br>10542539 | <b>Applicant(s)/Patent Under Reexamination</b><br>KUMAR, RAJENDRA |
|   | <b>Examiner</b><br>TUAN A TRAN             | <b>Art Unit</b><br>2618   |

| ORIGINAL           |                                   |          |       |       |      | INTERNATIONAL CLASSIFICATION |   |   |   |                     |             |  |  |  |  |  |  |  |
|--------------------|-----------------------------------|----------|-------|-------|------|------------------------------|---|---|---|---------------------|-------------|--|--|--|--|--|--|--|
| CLASS              |                                   | SUBCLASS |       |       |      | CLAIMED                      |   |   |   |                     | NON-CLAIMED |  |  |  |  |  |  |  |
| 455                |                                   | 557      |       |       |      | H                            | 0 | 4 | B | 1 / 38 (2006.01.01) |             |  |  |  |  |  |  |  |
| CROSS REFERENCE(S) |                                   |          |       |       |      | H                            | 0 | 4 | M | 1 / 00 (2006.01.01) |             |  |  |  |  |  |  |  |
|                    |                                   |          |       |       |      |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
| CLASS              | SUBCLASS (ONE SUBCLASS PER BLOCK) |          |       |       |      |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
| 455                | 556.1                             | 556.2    | 575.1 | 575.8 | 90.3 |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
| 455                | 418                               | 420      | 349   |       |      |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |       |       |      |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |       |       |      |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |       |       |      |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |       |       |      |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |       |       |      |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |       |       |      |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |       |       |      |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |       |       |      |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |       |       |      |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |       |       |      |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |       |       |      |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |       |       |      |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |       |       |      |                              |   |   |   |                     |             |  |  |  |  |  |  |  |

| <input type="checkbox"/> Claims renumbered in the same order as presented by applicant <input type="checkbox"/> CPA <input type="checkbox"/> T.D. <input type="checkbox"/> R.1.47 |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|---|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|
| Final   | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original |
|   | 1        |       | 17       |       | 33       |       | 49       |       |          |       |          |       |          |       |          |
|   | 2        |       | 18       | 1     | 34       |       | 50       |       |          |       |          |       |          |       |          |
|   | 3        |       | 19       | 2     | 35       |       |          |       |          |       |          |       |          |       |          |
|   | 4        |       | 20       |       | 36       |       |          |       |          |       |          |       |          |       |          |
|   | 5        |       | 21       |       | 37       |       |          |       |          |       |          |       |          |       |          |
|   | 6        |       | 22       | 3     | 38       |       |          |       |          |       |          |       |          |       |          |
|   | 7        |       | 23       | 4     | 39       |       |          |       |          |       |          |       |          |       |          |
|   | 8        |       | 24       | 5     | 40       |       |          |       |          |       |          |       |          |       |          |
|   | 9        |       | 25       |       | 41       |       |          |       |          |       |          |       |          |       |          |
|   | 10       |       | 26       |       | 42       |       |          |       |          |       |          |       |          |       |          |
|   | 11       |       | 27       |       | 43       |       |          |       |          |       |          |       |          |       |          |
|   | 12       |       | 28       |       | 44       |       |          |       |          |       |          |       |          |       |          |
|   | 13       |       | 29       |       | 45       |       |          |       |          |       |          |       |          |       |          |
|   | 14       |       | 30       |       | 46       |       |          |       |          |       |          |       |          |       |          |
|   | 15       |       | 31       |       | 47       |       |          |       |          |       |          |       |          |       |          |
|   | 16       |       | 32       |       | 48       |       |          |       |          |       |          |       |          |       |          |

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| NONE<br><br>(Assistant Examiner)  |  | <b>Total Claims Allowed:</b><br>5 |   |
| /TUAN A TRAN/<br>Primary Examiner.Art Unit 2618<br><br>(Primary Examiner) |  | 04/13/2009<br><br>(Date)          | O.G. Print Claim(s)<br>1<br><br>O.G. Print Figure<br>16A, 16B |